09824554

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X S ΛR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING RATE RATE NUMBER ADDI-ADDI-ENDMENT **PREVIOUSLY EXTRA** TIONAL TIONAL **AFTER** AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST m PRESENT REMAINING RATE ADDI-NUMBER RATE ADDI-ENT **PREVIOUSLY EXTRA AFTER** TIONAL **TIONAL** AMENDMENT PAID FOR FFF FEE Total (37 CFR 1.16(c)) Minus ENDM X S OR Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENDMENT AFTER **PREVIOUSLY FXTRA TIONAL** TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR X S Independent (37 CFR 1.16(b)) Minus X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000... 09824554 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** (Column 1) (Column 2) TYPE OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR **NUMBER EXTRA** BASIC FEE NUMBER FILED 355.00 BASIC FEE 710.00 OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR 20.00 INDEPENDENT CLAIMS a minus 3 = X40= X80= 720 OR **MULTIPLE DEPENDENT CLAIM PRESENT** +135= +270= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR 700. **CLAIMS AS AMENDED - PART II OTHER THAN** SMALL ENTITY OR **SMALL ENTITY** (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-⋖ REMAINING NUMBER PRESENT RATE TIONAL RATE **AMENDMENT** TIONAL AFTER **PREVIOUSLY EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST CLAIMS 8 ADDI-ADDI-REMAINING NUMBER PRESENT AMENDMENT PREVIOUSLY RATE TIONAL **AFTER** RATE **TIONAL EXTRA AMENDMENT PAID FOR** FEE FEE **Total** Minus X\$ 9= X\$18= OR Independent Minus X40 =**X80=** OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O ADDI-REMAINING ADDI-NUMBER PRESENT **AMENDMENT AFTER PREVIOUSLY** RATE TIONAL RATE TIONAL **EXTRA** AMENDMENT **PAID FOR** FEE FEE Total Minus X\$ 9= X\$18= OR Independent Minus X40= x80 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL TOTAL ADDIT, FEE ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number